

5

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		03/13/10
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			3-10-10
RESPONSE FORMALITY REVIEW		60417	5-3-10

INDEX OF CLAIMS

.....	Rejected	N	Non-elected
.....	Allowed	I	Interference
(Through numeral).....	Canceled	A	Appeal
.....	Restricted	O	Objected

[illegible][illegible]

Claim	Final	Original	Date
1	151	151	7/28/58
2	152	152	7/28/58
3	153	153	7/28/58
4	154	154	7/28/58
5	155	155	7/28/58
6	156	156	7/28/58
7	157	157	7/28/58
8	158	158	7/28/58
9	159	159	7/28/58
10	160	160	7/28/58
11	161	161	7/28/58
12	162	162	7/28/58
13	163	163	7/28/58
14	164	164	7/28/58
15	165	165	7/28/58
16	166	166	7/28/58
17	167	167	7/28/58
18	168	168	7/28/58
19	169	169	7/28/58
20	170	170	7/28/58
21	171	171	7/28/58
22	172	172	7/28/58
23	173	173	7/28/58
24	174	174	7/28/58
25	175	175	7/28/58
26	176	176	7/28/58
27	177	177	7/28/58
28	178	178	7/28/58
29	179	179	7/28/58
30	180	180	7/28/58
31	181	181	7/28/58
32	182	182	7/28/58
33	183	183	7/28/58
34	184	184	7/28/58
35	185	185	7/28/58
36	186	186	7/28/58
37	187	187	7/28/58
38	188	188	7/28/58
39	189	189	7/28/58
40	190	190	7/28/58
41	191	191	7/28/58
42	192	192	7/28/58
43	193	193	7/28/58
44	194	194	7/28/58
45	195	195	7/28/58
46	196	196	7/28/58
47	197	197	7/28/58
48	198	198	7/28/58
49	199	199	7/28/58
50	200	200	7/28/58

If more than 150 claims or 10 actions
staple additional sheet here

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